



EMPLOYMENT APPLICATION

California Pines Community Services District - 376 County Road 71 -Alturas, CA 96101

☎: (530) 233-2766

✉: calpinescsd@frontiernet.net

✉: hiring@calpinescsd-fire.net

*: www.cpcsd.specialdistrict.org

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related mental or physical disability, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For		Date of Application		
Last Name		First Name		Middle Name
Address Number	Street	City	State	Zip
Mailing Address (if different)				
Telephone Number(s):	Day	Evening	Message	
Email Address				

If you are under 18, can you provide the required proof of your eligibility to work? YES NO

Have you ever filed an application with us before? YES NO

If yes, give date _____

Have you ever been employed by the CalPines CSD or fire department? YES NO

If yes, give date _____

Are you currently employed? YES NO

May we contact your present employer? YES NO

Are you prevented from lawfully becoming employed in this country because of your Visa or Immigration Status?

Proof of citizenship or immigration status will be required upon employment. YES NO

On what date would you be available for work? _____

Are you currently available to work: Full Time Part-Time Temporary

Are you currently on "lay-off" status and subject to recall? YES NO

Can you travel if a job requires it? YES N

- WE ARE AN EQUAL OPPORTUNITY EMPLOYER -



Education

**Education beyond the requirements on the job description or not related to the job for which you are applying need not be listed.*

	High School	Undergraduate College/University*	Graduate/ Professional*
School Name, Location, and Phone Number			
Years Completed	9 10 11 12	1 2 3 4	1 2 3 4
Describe Course of Study			
Describe any specialized training, apprenticeship, skills, and extracurricular activities.			
Describe any honors you have received.			
State any additional information you feel may be helpful to us in considering your application.			

Indicate languages other than English that you can speak, read, and/or write.			
	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

List any professional, trade, business, or civic activities and offices held
<i>You may exclude memberships that would reveal sex, race, religion, national origin, age, ancestry, or handicap, or other protected status:</i>



Employment Experience

Start with your present or last job. Include military service assignments and volunteer activities related to the job you are applying for. You may exclude organizations that indicate race, color, religion, gender, national origin, mental or physical disability, or other protected status.

1.

Employer	Dates Employed		Work Performed
	From	To	
Telephone Numbers(s)			
Address			
Job Title Supervisor			
Reason for Leaving			

2.

Employer	Dates Employed		Work Performed
	From	To	
Telephone Numbers(s)			
Address			
Job Title Supervisor			
Reason for Leaving			

3.

Employer	Dates Employed		Work Performed
	From	To	
Telephone Numbers(s)			
Address			
Job Title Supervisor			
Reason for Leaving			

4.

Employer	Dates Employed		Work Performed
	From	To	
Telephone Numbers(s)			
Address			
Job Title Supervisor			
Reason for Leaving			



Special Skills and Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

References

Give the name, address, and telephone number of three professional references who are not related to you.

	Name	Address	Telephone Number
1.			
2.			
3.			

Do you have the physical and mental ability to perform the tasks in the **attached** job description, with or without accommodation? *(If accommodation is necessary, please describe below)*

YES NO Other: _____



Applicant's Statement

- I certify that the answers given herein are accurate and complete to the best of my knowledge.
- I authorize the investigation of all statements in this employment application as necessary for arrival at an employment decision. I understand and acknowledge that the policy of the Cal Pines CSD is such that a criminal conviction will not necessarily disqualify my employment application.
- I understand that if offered employment, the offer may be contingent on passing a pre-employment alcohol and drug screen, pre-employment physical, and criminal background check and voluntarily agreeing to submit to these procedures. I also understand that I must submit proof of my identity and legal right to work in the United States on my first day of employment.
- If the position I applied for requires driving in the course of work, I understand that I will be required to possess a current and valid California driver's license and provide a copy of my official driving record and proof of insurance.
- This employment application shall be considered active for a period not exceeding 90 days. Any applicant wishing to be considered for employment beyond this period should inquire whether applications are accepted.
- I understand and hereby acknowledge that any employment relationship with Cal Pines CSD is of an "at will" nature, which means that the employee may resign at any time. The Cal Pines CSD may discharge the employee at any time, with or without cause. I also understand that any written document or conduct may not change this "at-will" employment relationship unless such a change is expressly acknowledged in writing by an authorized executive of Cal Pines CSD.
- In the event of employment, I understand that false or misleading information in my application or interview(s) may result in discharge. I also know that I must abide by all the rules and regulations of the Cal Pines CSD.
- Should a search of public records (including records documenting an arrest, indictment, conviction, civil judicial action, tax lien, or outstanding judgment) be conducted by internal personnel employed by the Cal Pines CSD, I am entitled to copies of any such records obtained, unless I mark the checked box below. If I am not hired due to such information, I am entitled to a copy of any such records even though I have checked the box below.

I waive receipt of a copy of any public record described in the paragraph above.

X

Signature of Applicant



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